FORM D



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR IFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB Number: 3235-0076
Expires: April 30, 2008
Estimated average burden
hours per response. 16.00

SEC USI	SEC USE ONLY								
Prefix	Serial								
DATERE	CEIVED								
1	1								

UNIFORM LIMITED OFFERING	EXEMPTION
Name of Offering (check if this is an amendment and name has changed, and indicate warrants - Common Stock	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Type of Filing: New Filing Amendment	Section 4(6) ULOE PROCESSED
A. BASIC IDENTIFICATION D	JAN 1 6 2007
1. Enter the information requested about the issuer	1 0 2007
Name of Issuer (check if this is an amendment and name has changed, and indicate characteristics of the character	nge.) THOMSON FINANCIAL
Address of Executive Offices (Number and Street, City, State, 11726 SAN VICENTE BOULEVARD, SUITE 300, LOS ANGELES, CA 90049	
Address of Principal Business Operations (Number and Street, City, State (if different from Executive Offices)	Zip Code) Telephone Number (Including Area Code)
Brief Description of Business	
A holding company whose goal is to establish a major product capability for the next generospace, defense, medical and automotive applications. Type of Business Organization	eration of materials including: carbon fiber products for
corporation limited partnership, already formed limited partnership, to be formed	other (please specify):
Actual or Estimated Date of Incorporation or Organization: Month Year	tion for State:
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under R 77d(6).	negulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the advention it is due, on the date it was mailed by United States registered or certified mail to that	fress given below or, if received at that address after the date on
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washing	ton, D.C. 20549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must photocopies of the manually signed copy or bear typed or printed signatures.	
Information Required: A new filing must contain all information requested. Amendments ne thereto, the information requested in Part C, and any material changes from the information pre not be filed with the SEC.	ed only report the name of the issuer and offering, any changes viously supplied in Parts and BCP art E and the Appendix need
Filing Fee: There is no federal filing fee.	CDEC 1 9 2006
State:	4
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE and that have adopted this form. Issuers relying on ULOE must file a separate noticate to be, or have been made. If a state requires the payment of a fee as a precondition to accompany this form. This notice shall be filed in the appropriate states in accordance with	ce with the Securities Administrator in each state where sales the claim for the exemption, a fee in the proper amount shall

-ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

this notice and must be completed.

SEC 1972 (5-05)

A BASICIDENTIFICATION DATA

- Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Check Box(es) that Apply:	Promoter		Beneficial Owner	X	Executive Officer	\boxtimes	Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)				·		·		
FERGUSON, JOSEPH E.					•				
Business or Residence Addre	ss (Number and	Street	, City, State, Zip Co	de)					
11726 SAN VICENTE BO	ULEVARD, SUI	ΓE 30	0, LOS ANGELES	, CA	90049				
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)				·				
EICKELMAN, RONALD.	J,								
Business or Residence Addre	ss (Number and	Street	, City, State, Zip Co	de)	····				
11726 SAN VICENTE BO	ULEVARD, SUI	ΓE 30	0, LOS ANGELES	, ÇA	90049				•
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer	×	Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)				, .			•	
JOFFE, SELWYN H.	•								
Business or Residence Addre	ss (Number and	Street	, City, State, Zip Co	de)			-		
11726 SAN VICENTE BO	ULEVARD, SUI	ΓE 30	0, LOS ANGELES	, CA	90049				
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer	×	Director	, 🗆	General and/or Managing Partner
Full Name (Last name first, i	f individual)								 ,
BARNUM, BRIAN K.									
Business or Residence Addre	ss (Number and	Street	, City, State, Zip Co	de)					
11726 SAN VICENTE BO			•		90049				•
Check Box(es) that Apply:			Beneficial Owner	×			Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)						-		
BAUCHMAN, MORTON	R.		•						
Business or Residence Addre		Street	, City, State, Zip Co	de)	•				al all
11726 SAN VICENTE BO	ULEVARD, SUI	ΓE 30	0, LOS ANGELES	, CA	90049		•		
Check Box(es) that Apply:	Promoter		Beneficial Owner	×	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)			,					*****
GIORGIEV, STEVE									
Business or Residence Addre	ss (Number and	Street	, City, State, Zip Co	de)					
11726 SAN VICENTE BO	ULEVARD, SUI	ΓE 30), LOS ANGELES	, CA	90049				
Check Box(es) that Apply:	Promoter	X	Beneficial Owner	. 🗆	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								· · · · · · · · · · · · · · · · · · ·
KLINE HAWKES PACIFI	C, L.P.								
Business or Residence Addre	ss (Number and	Street	, City, State, Zip Co	de)					
11726 SAN VICENTE BO	ULEVARD. SUI	ΓE 30	0, LOS ANGELES	, CA	90049				
					onal copies of this sh	eet, a	s necessary	·)	

A BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. General and/or Executive Officer Director Check Box(es) that Apply: Promoter ■ Beneficial Owner Managing Partner Full Name (Last name first, if individual) PAUL AND SANDRA PENDORF REVOCABLE TRUST U/A DATED MARCH 28, 2000 AS RESTATED Business or Residence Address (Number and Street, City, State, Zip Code) 11726 SAN VICENTE BOULEVARD, SUITE 300, LOS ANGELES, CA 90049 ☐ Beneficial Owner Check Box(es) that Apply: Promoter Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Description | Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Director Beneficial Owner Executive Officer General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Beneficial Owner Check Box(es) that Apply: Promoter Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or П Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

10 50	(*************************************	d same to			В. П	NFORMAT	ION ABOU	T OFFERI	NG	(des)(via p	and the second		
1	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									Yes	No ⊠		
ι.	rias tile		i, or does in		· .	ı Appendix					•••••	u	.
2.	What is	the minim	um investn					_				\$ 10.0	0
What is the minimum investment that will be accepted from any individual? Does the offering permit joint ownership of a single unit?									Yes	No			
3.		_	-									_	
4.			ion request										
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.										with a state	•	· .	
Ful	Full Name (Last name first, if individual)												
	Business or Residence Address (Number and Street, City, State, Zip Code)												
Bus	siness or	Residence	Address (N	lumber and	d Street, C	ity, State, 2	Lip Code)		-				
Nar	ne of As	sociated Br	oker or De	aler	,						·		
Stat	tes in Wh	nich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						•
	(Check	"All States	" or check	individual	States)			***************************************	***************************************	***************************************		A1	l States
	AL .	AK	AZ	AR	CA	(CO)	CT	DE]	DC	FL	GA	HI	ID
	ĪL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NI	ŇΜ	NY	NC	ND	OH	OK	OR	PA
	RI	[SC]	SD	TN	TX	UT	VT	[VA]	[WA]	WV	WL	WY	PR
Full	Name (Last name	first, if indi	ividual)					-				
Bus	iness or	Residence	Address (N	Number an	d Street, C	ity, State,	Zip Code)			_			
Nan	ne of Ass	sociated Br	oker or Dea	aler	-		i						
1144	01 113	ociuted Bi	oker or Dei	4101									
Stat			Listed Has										
	(Check	"All States	or check	individual	States)			***************************************	**************		•••••	□ Al	1 States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
		IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH)	NJ TX	NM UT	NY VT	NC VA	ND WA	(ОН) WV	OK W1	OR WY	PA PR
Full			first, if indi										
		B 11	,		10								
Bus	iness or	Residence	Address (N	Number an	d Street, C	ity, State,	Zip Code)						
Nan	ne of Ass	sociated Br	oker or Dea	aler									
Stat	es in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						 .
	(Check-	"All States	" or check	individual	States)	•••••	•••••	•••••	•••••			☐ Al	l States
	AL	AK	ΑZ	ĀR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL MT	NE)	IA NV	KS	KY	LA	ME	MD	MA ND	MI	MN	MS OR	MÖ .
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	WA	OH WV	OK WI	WY	PA
	. —	*			_							•	` '

G OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	already exchanged.	Aggre	gate	Α	mount Already
	Type of Security	Offering	Price		Sold
	Debt	s	0.00	s _	0.00
	Equity	5	0.00	\$	0.00
	Common Preferred	Preferred S 4,363,640.00 S 0.00 S 0.00 S 4,363,640.00 JLOE. The purchased securities in this ings under Rule 504, indicate egate dollar amount of their Number Investors 2 Type of Security Warrants Warrants Warrants Warrants Warrants Type of Security Warrants			
	Convertible Securities (including warrants)	4,363	,640.00	\$_	4,363,640.00
	Partnership Interests	s	0.00		0.00
	Other (Specify)	\$	0.00	\$	0.00
	Total	s 4,363	,640.00	\$_	4,363,640.00
	Answer also in Appendix, Column 3, if filing under ULOE.				_
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
		Invest	ors		Aggregate Pollar Amount of Purchases
	Accredited Investors	2		\$_	4,363,640.00
	Non-accredited Investors			\$_	
	Total (for filings under Rule 504 only)			\$_	•
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.				
	Type of Offering			. [Oollar Amount Sold
	Rule 505	Warrant	<u> </u>	\$_	4,363,640.00
	Regulation A			\$_	
•	Rule 504			\$_	
	Total	Warrant	<u> </u>	S _	4,363,640.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$_	0.00
	Printing and Engraving Costs	<i></i>		\$_	0.00
	Legal Fees		X	\$	10,000.00
	Accounting Fees			\$_	0.00
	Engineering Fees			\$	0.00
	Sales Commissions (specify finders' fees separately)			\$_	0.00
	Other Expenses (identify) Miscellaneous		X	\$	2,500.00
	Total		X	\$_	12,500.00

C. OFFERING BRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	F		usted gross		\$ <u>4,3</u>	51,140.00
	Indicate below the amount of the adjusted gross particle of the purposes shown. If the amount for a check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Particle of the estimate.	iny purpose is not known, furnish an est of the payments listed must equal the adju	timate and			
	·	,	l	Payments to		•
	•	, -		Officers, Directors, &	р	ayments to
	•			Affiliates		Others
	Salaries and fees		🗀 🕏	0.00	□ \$	0.00
	Purchase of real estate			0.00	_ □ \$	0.00
	Purchase, rental or leasing and installation of ma	achinery	_			
	and equipment		_		\$	0.00
	Construction or leasing of plant buildings and fa	cilities	🔲 🕏	0.00		0.00
	Acquisition of other businesses (including the va					
	offering that may be used in exchange for the assissuer pursuant to a merger)			0.00	ПS	0.00
	Repayment of indebtedness		_		□ \$	0.00
	Working capital				ш-	4,351,140.00
	Other (specify):				E_ °-	
	Other (speetry).		LJ "	,	□ Ψ-	
			 	0.00	□ \$.	0.00
	Column Totals				[] \$	4,351,140.00
	Total Payments Listed (column totals added)			× \$ 4,3	 51,140	0.00
		ETUTANOTAL ANALOGO LA	···-			
		DEHEDERALSIGNARURE		. '		
signa	ssuer has duly caused this notice to be signed by th ture constitutes an undertaking by the issuer to fu nformation fürnished by the issuer to any non-ac	irnish to the U.S. Securities and Exchang	ge Čommissio	n, upon writter		
Issue	r (Print or Type)	Signature	Dat	e		
ADV	ANCED PRODUCTS CORPORATION	Lelly -	DE	CEMBER	<u>5</u> ,	2006
Nam	e of Signer (Print or Type)	Title of Signer (Print of Type)			,	
JOSI	PH E. FERGUSON	PRESIDENT and SECRETARY				

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

. 1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No 🛣
	. See Appendix, Column 5, for state response.	:	
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is for D (17 CFR 239.500) at such times as required by state law.	iled a no	tice on Form
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, informa issuer to offerees.	tion furn	ished by the
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be en limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer clai of this exemption has the burden of establishing that these conditions have been satisfied.		
	uer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its beha thorized person.	lf by the	undersigned '

Signature

Title (Print or Type)

PRESIDENT and SECRETARY

Date

DECEMBER 15, 2006

EL STATIESIGNATIURE

Instruction:

Issuer (Print or Type)

Name (Print or Type)

JOSEPH E. FERGUSON

ADVANCED PRODUCTS CORPORATION

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 2 1 3 4 Disqualification Type of security under State ULOE and aggregate Intend to sell (if yes, attach to non-accredited offering price Type of investor and explanation of offered in state amount purchased in State waiver granted) investors in State (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) Number of Number of Non-Accredited Accredited Investors State No Investors Amount Amount Yes No ΑL ΑK AZAR CA CO CTWarrant \$2,493,510 DE l 2,493,510 DC FL GA HI ID IL IN. IA KS KY LA ME MD MA ΜI Warrant \$1,870,730 1,870,130 MN MS

APPENDIX

		· ·	3			4	· .		5	
`	·	1					i	Disquali	fication	
	Intend	to sell	Type of security and aggregate		. u				te ULOE attach	
	to non-ac	credited	offering price		Type of i	nvestor and		explanation of waiver granted)		
	investors		offered in state		amount purchased in State (Part C-Item 2)					
	(Part B-	Item ()	(Part C-Item 1)	Number of	(Part C	Number of	-	(Part E-	Item 1)	
				Accredited		Non-Accredited				
State	Yes	No	·	Investors	Amount	Investors	Amount	Yes	No	
МО	_	-				<u></u>	i			
МТ								·		
NE				,					1	
NV					-					
NH			·							
lи										
NM										
NY	,									
NC							,			
ND										
ОН	•									
ОК										
OR	-	.1								
PA					٠					
RI			· · · · · · · · · · · · · · · · · · ·		·					
SC										
SD		,				,				
TN										
TX								<u> </u>		
UT							· .			
VT		`								
VA										
WA										
wv								-		
WI				,		·			,	

APPENDEX

1	2		3		4							
ł	ŀ							Disquali	fication			
1	ļ		Type of security									
	Intend	to sell	and aggregate				İ					
	to non-ac	credited	offering price					explana	attach ition of			
	investors	in State	offered in state	amount purchased in State wa			* *					
	(Part B-	Item 1)	(Part C-Item 1)	(Part C-Item 2)					Item 1)			
				Number of								
ł		1	٠.	Accredited		Non-Accredited			1			
State	Yes	· No		Investors	Amount	Investors	Amount	Yes	No			
WY												
	1	1		I I		1		<u> </u>				
PR					•							